

Claims Agent Copy

UNITED STATES BANKRUPTCY COURT _____ DISTRICT OF DELAWARE _____		PROOF OF CLAIM
Name of Debtor: NEW COLONY FARMS LLC	Case Number: 13-11766-BLS	
NOTE: Do not use this form to make a claim for an administrative expense that arises after the bankruptcy filing. You may file a request for payment of an administrative expense according to 11 U.S.C. § 503.		
Name of Creditor (the person or other entity to whom the debtor owes money or property): Department of the Treasury - Internal Revenue Service		
Name and address where notices should be sent: Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101-7346		COURT USE ONLY
Telephone number: 1-800-973-0424 email: Creditor Number:		<input type="checkbox"/> Check this box if this claim amends a previously filed claim. Court Claim Number: _____ (If known) Filed on: _____
Name and address where payment should be sent (if different from above): Internal Revenue Service 1352 MARROWS ROAD STE 204 NEWARK, DE 19711-5445		<input type="checkbox"/> Check this box if you are aware that anyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars.
Telephone Number: 302-286-1560 email:		RECEIVED
1. Amount of Claim as of Date Case Filed: \$ 1,810.73		SEP 09 2013
If all or part of the claim is secured, complete item 4. If all or part of the claim is entitled to priority, complete item 5.		BMC GROUP
<input type="checkbox"/> Check this box if the claim includes interest or other charges in addition to the principal amount of claim. Attach a statement that itemizes interest or charges.		
2. Basis for Claim: Taxes _____ (See instruction #2)		
3. Last four digits of any number by which creditor identifies debtor: See Attachment	3a. Debtor may have scheduled account as: (See instruction #3a)	3b. Uniform Claim Identifier (optional): (See instruction #3b)
4. Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a right of setoff, attach required redacted documents, and provide the requested information.		Amount of arrearage and other charges, as of the time case filed, included in secured claim, if any: \$ _____
Nature of property or right of setoff: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other Describe:	Basis for perfection: _____	
Value of Property: \$ _____	Amount of Secured Claim: \$ _____	
Annual Interest Rate ____% <input type="checkbox"/> fixed or <input type="checkbox"/> variable (when case was filed)	Amount Unsecured: \$ _____	
5. Amount of Claim Entitled to Priority under 11 U.S.C. §507(a). If any part of the claim falls into one of the following categories, check the box specifying the priority and state the amount.		
<input type="checkbox"/> Domestic support obligations under 11 U.S.C. §507(a)(1)(A) or (a)(1)(B).	<input type="checkbox"/> Wages, salaries, or commissions (up to \$12,475*) earned within 180 days before the case was filed or the debtor's business ceased, whichever is earlier - 11 U.S.C. §507 (a)(4).	<input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. §507 (a)(5).
<input type="checkbox"/> Up to \$2,775* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. §507 (a)(7).	<input checked="" type="checkbox"/> Taxes or penalties owed to governmental units - 11 U.S.C. §507 (a)(8).	<input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. §507 (a)(____).
		Amount entitled to priority: \$ 1,810.73
*Amounts are subject to adjustment on 4/01/16 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.		
6. Credits. The amount of all payments on this claim has been credited for the purpose of making this proof of claim. (See instruction #6)		



7. Documents: Attach are **redacted** copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, security agreements, or, in the case of a claim based on an open-end or revolving consumer credit agreement, a statement providing the information required by FRBP 3001(c)(3)(A). If the claim is secured, box 4 has been completed, and **redacted** copies of documents providing evidence of perfection of a security interest are attached. If the claim is secured by the debtor's principal residence, the Mortgage Proof of Claim Attachment is being filed with this claim. (See instruction #7, and the definition of "redacted".)

DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.

If the documents are not available, please explain:

8. Signature: (See instruction #8)

Check the appropriate box.

- I am the creditor.
 I am the creditor's authorized agent.
 I am the trustee, or the debtor, or their authorized agent. (See Bankruptcy Rule 3004.)
 I am a guarantor, surety, indorsor, or other codebtor. (See Bankruptcy Rule 3005.)

I declare under penalty of perjury that the information provided in this claim is true and correct to the best of my knowledge, information, and reasonable belief.

Print name: L. WHITE
 Title: Revenue Officer/Advisor
 Company: Internal Revenue Service

/s/ L. WHITE
 (Signature)

09/05/2013
 (Date)

Address and telephone number (if different from notice address above):

Internal Revenue Service
 1352 MARROWS ROAD
 STE 204
 NEWARK, DE 19711-5445

Telephone number: 302-286-1560

Email:

Proof of Claim for Internal Revenue Taxes

Department of the Treasury/Internal Revenue Service



Form 10
Attachment

In the Matter of: NEW COLONY FARMS LLC
510 S 17TH ST
STE 104
AMES, IA 50010

Case Number	13-11766-BLS
Type of Bankruptcy Case	CHAPTER 11
Date of Petition	07/15/2013

The United States has not identified a right of setoff or counterclaim. However, this determination is based on available data and is not intended to waive any right to setoff against this claim debts owed to this debtor by this or any other federal agency. All rights of setoff are preserved and will be asserted to the extent lawful.

Unsecured Priority Claims under section 507(a)(8) of the Bankruptcy Code

<i>Taxpayer ID Number</i>	<i>Kind of Tax</i>	<i>Tax Period</i>	<i>Date Tax Assessed</i>	<i>Tax Due</i>	<i>Interest to Petition Date</i>
XX-XXX9246	WT-FICA	09/30/2013	/ NOT FILED	\$1,810.73	\$0.00

Total Amount of Unsecured Priority Claims:

\$1,810.73

IF THE ABOVE LIABILITY HAS BEEN LISTED AS A POTENTIAL LIABILITY FOR THE DEBTOR BECAUSE THE RETURN HAS NOT BEEN FILED, AS SOON AS THE DEBTOR FILES THE RETURN WITH THE IRS AS REQUIRED BY LAW THIS CLAIM WILL BE ADJUSTED TO REFLECT THE ASSESSED LIABILITY.

Internal Revenue Service

SBSE:AI, Insolvency
Suite 204

1352 Marrows Road
Newark, DE 19711-5475

Official Business

Penalty for Private Use, \$300

BMC Group Inc
Attn: Agfaed USA, LLC Claims Processing
18675 Lake Drive East
Chanhassen, MN 55317

1. Ensure there are no other shipping or tracking labels attached to your package. Select the Print button on the print dialog box that appears. Note: If your browser does not support this function select Print from the File menu to print the label.

2. Fold the printed sheet containing the label at the line so that the entire shipping label is visible. Place the label on a single side of the package and cover it completely with clear plastic shipping tape. Do not cover any seams or closures on the package with the label. Place the label in a UPS Shipping Pouch. If you do not have a pouch, affix the folded label using clear plastic shipping tape over the entire label.

3. GETTING YOUR SHIPMENT TO UPS
 UPS locations include the UPS Store®, UPS drop boxes, UPS customer centers, authorized retail outlets and UPS drivers.
 Schedule a same day or future day Pickup to have a UPS driver pickup all your CampussShip packages.
 Hand the package to any UPS driver in your area.
 Take your package to any location of The UPS Store®, UPS Drop Box, UPS Customer Center, UPS Alliances (Office Depot® or Staples®) or Authorized Shipping Outlet near you. Items sent via UPS Return Services(SM) (including via Ground) are also accepted at Drop Boxes. To find the location nearest you, please visit the Resources area of CampussShip and select UPS Locations.

Customers with a Daily Pickup

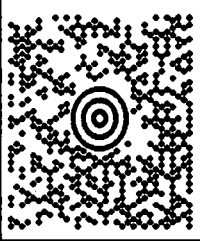
Your driver will pickup your shipment(s) as usual.

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1 LBS PAK 1 OF 1

WHITE LATOYA G
302-2861560
INTERNAL REVENUE SERVICE
1352 MARROW RD
NEWARK DE 19711

SHIP TO:
ATTN: AGREED USA, LLC CLAIMS PROCES
BMC GROUP INC
18675 LAKE DRIVE EAST
CHANHASSEN MN 55317-9383



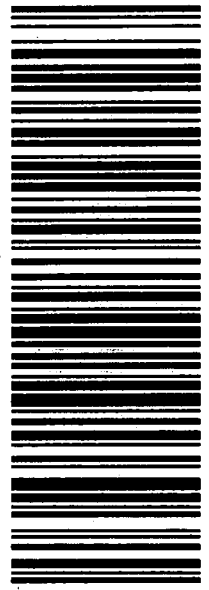
MN 559 9-03



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W020590 42.04.07/2013



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SEP 09 2013

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